	APPROVAL, IF ANY:		
(This space for Fe	deral or State Office use)	ritle	DATE
SIGNED WM	( by U.C.	ritte <u>Drilling Superintenden</u>	DATE 9///09
18. I hereby certify th	at the foregoing is true and correct	Duilling Consuitander	t 9/7/89
			C5 AH '89
9/1/89	Ran 223 jts 5 1/2" 17# Cmtd w/1200 sks pox & 3 PD @ 12:30 pm 9/1/89 RR @ 6:30 pm	csg, Set @ 9256 350 \$ks C1 "H"	RECE
	TD 7 7/8" hole @ 9256 (	,	SEP CAL
<ol> <li>DESCRIBE PROPOSED proposed work, nent to this work.</li> </ol>	If well is directionally drilled, give sub	eall pertinent details, and give pertinent dates, surface locations and measured and true vertic	, including estimated date of starting any al depths for all markers and zones perti
REPAIR WELL (Other)	CHANGE PLANS	(Other) TD & CSG JO (Note: Report results	Ob X n of multiple completion on Well letion Report and Log form.)
TEST WATER SHUT FRACTURE TREAT SHOOT OR ACIDIZE	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON*	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING	REPAIRING WELL ALTERING CASING ABANDONMENT®
	NOTICE OF INTENTION TO:	SUBSEQ	DENT REPORT OF:
16.	Check Appropriate Box To I	3893.1 GL Indicate Nature of Notice, Report, or C	
14. PERMIT NO.	15. ELEVATIONS (Show	w whether DF, RT, GR, etc.)	Sec. 12, T18S, R32E  12. COUNTY OR PARISH 13. STATE  Lea NM
L. LOCATION OF WELL   See also space 17 bo At surface	Report location clearly and in accordance low.)  330' FNL & 660'		North Young Bone Spring  11. SHC., T., B., M., OR BLE. AND SURVET OR ARMA
P.O. BOX 1	933, Roswell, New Mexic	co <u>88202</u>	9. WELL NO. #4
Harvey E.	Yates Company		Chevron 12 Federal
OIL GAS WELL NAME OF OPERATOR	OTHER		8. FARM OR LEASE NAME
SUI (Do not use th	NDRY NOTICES AND REP  s form for proposals to drill or to deep use "APPLICATION FOR PERMIT	OKIS ON WELLS en or plug back to a different reservoir. "for such proposals.)	7. UNIT AGREEMENT NAME
	BUREAU OF LAND MANA		NM-40456  B. IF INDIAN, ALLOTTEE OR TRIBE NAME
Form 3160-5 November 1983) Formerly 9-331)	UNITE STATE DEPARTMENT OF THE		Budget Burcau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO

\*See Instructions on Reverse Side

505

Form approved.

RECEIVED

SEP 27 1989

OCD MG: 30 AMAGA